

Procurement Card Application Instructions

Cardholder Information

Cardholder Name – The individual who will be responsible for all purchases made on the card. This person must be an employee of USM.

Social Security No. – Social security number of the cardholder.

Date of Birth – Date of birth of the cardholder (MM/YYYY).

Employee ID – Employee ID of the cardholder

Email Address – Email address for the cardholder.

Department Information

Department Name – Name of the department for the cardholder.

Department Mailing Address – The United States Postal Service mailing address for the department.

Business Phone No. – Cardholder's phone number.

Default Budget String – Main FUND, DEPT, PROGRAM, and/or PROJECT associated with card

Text on Card – This information will be displayed on the card below the Cardholders' name.

Other Information

Spending Limit – This is the total dollar limit for a billing period for a card. The limit set by the university is \$20,000

Single Transaction Limit – The single transaction amount of \$5,000

Application for Procurement Card

Cardholder Information

Cardholder Name _____

Social Security No. _____ Date of Birth _____

Employee id _____

Email address _____

Department Information

Department Name _____

Department Mailing Address _____

Department Phone No. _____

Default Budget _____

(Main FUND, DEPT ID, PROGRAM, AND/OR PROJECT ASSOCIATED WITH CARD)

Email Address _____

Text on Card _____

(26 Characters displayed under cardholder's name, may be department name or project name)

Other Information

Spending Limit: \$ _____ (not to exceed \$20,000)

Single Transaction Limit: \$ _____ (not to exceed \$5,000)

Signature of applicant

Budget authority signature

*Send the completed Procurement Card Application to:
Procurement Card Administrator
118 College Drive #5003*

Internal Use Only

*Date Received
Date Processed
Issue Date
Card Account No.*